

Annual Submissions: Section 4.1				
SA Init.	List of Responsible Principals/Individuals*	Title	Date NDL List Checked	SA Comment: Check if on NDL
Each undersigned individual certifies that s/he has not been associated with an organization that was terminated from the CACFP for being seriously deficient as a result of activities that occurred while s/he was either employed by or serving on the Board of any organization sponsoring the Child and Adult Care Food Program. The undersigned also certifies that s/he will disclose any criminal convictions that may indicate a lack of business integrity. Such convictions may include fraud, anti-trust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, or obstruction of justice.				
	1 Sign:			<input type="checkbox"/>
	Print Name			
	2 Sign:			<input type="checkbox"/>
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	15 Sign:			<input type="checkbox"/>
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*RPs & RIs may include: Exec. Dir., CACFP Coord/Dir, CACFP Monitor(s), Board Members, Fiscal Officer